Approved for use through 10/31/2002 OMB 0651-0032 U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number:

PATENT APPLICATION TRANSMITTAL

10406/16 Attorney Docket No

First Inventor

M Pamela Griffin, et al

Method for the Early Diagnosis of Subacute, Potentially Catastroph

Express Mail Label No.

Only for nev	w nonprovisional app	lications under 37 C.	.F K 1.03(D))									
	APPLICA	ATION ELEME	NTS	ADDR	ESS TO:	Assistant Com Box Patent Ap	imissioner for Patents	jce				
See MPEP chapter 600 concerning utility patent application contents.						Washington, D	C 20231					
(Su	(Submit an onginal and a duplicate for fee processing)				7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)							
	oplicant claims sm		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)									
See 37 CFR 1.27. 3. Specification [Total Pages 24]					a. Computer Readable Form (CRF)							
(pr	referred arrangement Descriptive title of the	t set forth below)		 b. Specification Sequence Listing on: i ☐ CD-ROM or CD-R (2 copies), or 								
- C	cross References to	Related Applications		и. 🗌 paper								
	Statement Regarding Reference to sequent		D	c. Statements verifying identity of above copies								
	or a computer program Background of the Inv	program listing appendix If the Invention			ACCOMPANYING APPLICATIONS PARTS							
- 8	Brief Summary of the Brief Description of the	Invention		9. Assignment Papers (cover sheet & document(s))								
- E	Detailed Description	le Drawings (il med)		10. 37 C.F R.§3.73(b) Statement Power of (when there is an assignee) Attorney								
	- Claim(s) - Abstract of the Disclosure						ent (if applicable)					
	rawing(s) (35 U.S	, -	Sheets 5	12. 🛛	☐ Information Disclosure ☐ Copies of IDS Statement (IDS)/PTO-1449 ☐ Citations							
5. Oath or D	Declaration Newly executed ([Total F	Pages 3]	13. 🖂		Amendment						
	Copy from a prior		FR 1.63 (d))	14. 🛛		eipt Postcard (N						
		n/divisional with Bo		15. 🗆		specifically iten						
i	DELETION OF	INVENTOR(S)		(if foreign priority is claimed)								
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).					16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(ı). Applicant must attach form PTO/SB/35 or its equivalent.							
6. Application Data Sheet. See 37 CFR 1.76					17. Other. Assignments w/copies of Notice of Recordation							
					and Assignment Documents (copies from parent; Small Entity Declarations (copies from parent)							
				Declara	uons (copies i	non parenty						
18. If a CON	TINUING APPLICAT	ΓΙΟΝ, check approp	riate box, and suppl	the requis	ite information	below and in a p	oreliminary amendment					
1	olication Data Sheet	t under 37 CFR 1 7	6 T Castinuation in part	· (CID)	of prio	or application No:	09 /271.279					
⊠ Conti	Reference to Relate	ed Application includ	☐ Continuation-in-part ed in Preliminary Ame	ndment Atta	ched Note A	cross reference t	o related application(s) m	iust be				
filed with the	LISPTO before four	months from the filin	a date of this continui	ng applicatio	·n							
		mant of the disclosu	he entire disclosure of the accompany portion has been in	ana or divis	ionai applicati	on and is nerep	h or declaration is supp incorporated by reference plication parts.	nce.				
The incorpo	ration <u>can only</u> se	. onou upon mion	17. CORRESPO									
or Correspondence address below												
Customer Number or Bar Code Label (Insert Customer No of Attach bar code label here)												
Name	Name PATENT TRADEMARK OFFICE											
			PRIENT TRADE	MARK UFFICE								
Address												
City			State			Zip Code						
Country			Telephone			Fax						
Name (P	rint/Type)	Judith L Toffenett	i	Registration No. (Attorney/Agent) 39,048								
Signature	9	Malley	- T			Date	1/29/01					

Burden Hour Statement This form is estimated to take 0.2 hours to complete Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark

Complete if Known

PTO/SB/17 (11-00)
Approved for use through 10/31/2002 OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL	
for FY 2001	

Herewith Filing Date M Pamela GRIFFIN, et al. First Named Inventor

Patent fees are subject to annual revision

K. Kamm (Anticipated) Examiner Name Group / Art Unit 3762 (Anticipated)

Unassigned

TOTAL AMOUNT OF PAYMENT (\$)

436

10406/16 Attorney Docket No

Application Number

METHOD OF PAYMENT (check one)					FEE CALCULATION (continued)						
The Commissioner is hereby authorized to charge					3. ADDITIONAL FEES						
Indicated fees and credit any over payments to				Large Entity		Small Entity					
Deposit		Fee Code	Fee	Fee Code	Fee	Fee Description	Fee Paid				
Account	İ	11-0600				105	(\$) 130	205	(\$) 65	Surcharge - late filing fee or oath	
Number				127	50	227	25	Surcharge - late provisional filing fee or cover sheet.			
Deposit Account Kenyon & Kenyon				139	130	139	130	Non-English specification			
Account Renyon & Kenyon					147	2,520	147	2,520	For filing a request for reexamination		
☐ Charge Any Additional Fee Required Under 37 CFR 1 16 and 1 17					112	920*	112	920*	Requesting publication of SIR prior to Examiner action		
Applicant claims small entity status See 37 CFR 1.27					113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		
2. 🗌 Pa	ayment	Enclosed.				115	110	215	55	Extension for reply within first month	
☐ Check ☐ Credit card ☐ Money ☐ Other					116	390	216	195	Extension for reply within second month		
			Order			117	890	217	445	Extension for reply within third month	
FEE CALCULATION 1. BASIC FILING FEE					118	1,390	218	695	Extension for reply within fourth month		
	itity S					128	1,890	228	945	Extension for reply within fifth month	
Fee Fe		ee Fee	Fee Description			119	310	219	155	Notice of Appeal	
Code (\$)		ode (\$)	LIVIT Character	Fee Paid		120	310	220	155	Filing a brief in support of an appeal	
101 71		01 355	Utility filing fee	355	\dashv	121	270	221	135	Request for oral hearing	
106 32 107 49		06 160 07 245	Design filing fee Plant filing fee			138	1,510	138	1 ,510	Petrtion to institute a public use proceeding	
108 71	0 2	08 355	Reissue filing fee		_	140	110	240	55	Petition to revive – unavoidable	
114 15	0 2	14 75	Provisional filling	fee		141	1,240	241	620	Petition to revive – unintentional	
SUBTOTAL (1) (\$) 355					142	1,240	242	620	Utility issue fee (or reissue)	 	
SUBTOTAL (1) (\$) 355					143	440	243	220	Design issue fee		
2. EXTRA CLAIM FEES				144	600	244	300	Plant issue fee	\vdash		
				ee from Fee		122	130	122	130	Petitions to the Commissioner	
Total Claims	29	-20** =		elow Paid 9 = 81		123	130	123	130	Petitions related to provisional applications	
Independent Claims	2	-3** =	= 0 X	80 = 0		126	180	126	180	Submission of Information Disclosure Stmt	
Multiple Dependent	1		x	= 0		581	40	581	40	Recording each patent assignment per property (times number of properties)	
Large Fee	Entity Fee	Small En	tity Fee Descript	tion		146	710	246	355	Filing a submission after final rejection (37 CFR § 1 129(a))	
Code 103	(\$) 18	Code (\$) Fee Descript Claims in exc			149	710	249	355	For each additional invention to be examined (37 CFR § 1 129(b))	
103	80	203 9		claims in excess of 3		l					
104	270	204 13	· •	endent claim, if not pa		179	710	279	355	Request for Continued Examination (RCE)	
109	80	209 40	** Reissue in original pater	dependent claims ov	er	169	900	169	900	Request for expedited examination of a design application	
110	18	210 9	• .	aims in excess of 20	and						
			SUBTOTAL (2)	(\$) 81		Other fee (specify)					
					*Redu	uced by B	asic Fil	ıng Fee F	Paid SUBTOTAL (3) (\$) 0		
**or number	r previou	usly paid, if grea	ater, For Reissues, se	ee above							

SUBMITTED BY Complete (if applicable)									
Name (Print/Type)	Judith L. Toffenetti	Registration No Attorney/Agent)	39 048	Telephone	202-220-4200				
Signature	1 Tole	Peude		Date 20101	1/29/01				

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

4F